

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Apr 30, 2007 8:00 am**  
**Secretary of State**

04-30-2007 90439 047 \*\*\*150.00

<b>DOCUMENT # P96000068785</b>					
<b>1. Entity Name</b> <b>M.J.M.K. - RIVERWALK, INC.</b>					
<b>Principal Place of Business</b> <b>6400 CONGRESS AVENUE, SUITE 2000</b> <b>BOCA RATON, FL 33487</b>			<b>Mailing Address</b> <b>6400 CONGRESS AVENUE, SUITE 2000</b> <b>BOCA RATON, FL 33487</b>		
<b>2. Principal Place of Business - No P.O. Box #</b> <b>5801 Congress Ave</b>		<b>3. Mailing Address</b> <b>5801 Congress Ave</b>			
<b>Suite, Apt. #, etc.</b> <b>Suite 200</b>		<b>Suite, Apt. #, etc.</b> <b>Suite 200</b>			
<b>City &amp; State</b> <b>Boca Raton, FL</b>		<b>City &amp; State</b> <b>Boca Raton, FL</b>			
<b>Zip</b> <b>33487</b>		<b>Country</b> <b>USA</b>		<b>Zip</b> <b>33487</b>	
<b>Country</b> <b>USA</b>		<b>4. FEI Number</b> <b>65-0696670</b>			
<b>5. Certificate of Status Desired</b> <input type="checkbox"/> <b>\$8.75 Additional Fee Required</b>				<b>Applied For</b> <b>Not Applicable</b>	
<b>6. Name and Address of Current Registered Agent</b> <b>LEVY, ROBERT A</b> <b>6400 CONGRESS AVENUE, SUITE 2000</b> <b>BOCA RATON, FL 33487</b>			<b>7. Name and Address of New Registered Agent</b> <b>Name: Robert A Levy</b> <b>Street Address (P.O. Box Number is Not Acceptable): 5801 Congress Ave</b> <b>Suite 200</b> <b>Boca Raton, FL</b> <b>FL</b> <b>Zip Code: 33487</b>		
<b>8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.</b>					
<b>SIGNATURE:</b>				<b>DATE:</b> <b>April 26, 2007</b>	
<small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>					
<b>FILE NOW!!! FEE IS \$150.00</b> <b>After May 1, 2007 Fee will be \$550.00</b>			<b>9. Election Campaign Financing</b> <b>Trust Fund Contribution.</b> <input type="checkbox"/> <b>\$5.00 May Be Added to Fees</b>		
<b>10. OFFICERS AND DIRECTORS</b>			<b>11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11</b>		
<b>TITLE</b> <b>NAME</b> <b>STREET ADDRESS</b> <b>CITY - ST - ZIP</b>	<b>D</b> <b>LEVY, ROBERT A</b> <b>6400 CONGRESS AVENUE, SUITE 2000</b> <b>BOCA RATON, FL 33487</b>		<b>TITLE</b> <b>NAME</b> <b>STREET ADDRESS</b> <b>CITY - ST - ZIP</b>	<b>Robert A Levy</b> <b>5801 Congress Ave Suite 200</b> <b>Boca Raton, FL 33487</b>	
<b>TITLE</b> <b>NAME</b> <b>STREET ADDRESS</b> <b>CITY - ST - ZIP</b>	<input type="checkbox"/> Delete		<b>TITLE</b> <b>NAME</b> <b>STREET ADDRESS</b> <b>CITY - ST - ZIP</b>	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
<b>TITLE</b> <b>NAME</b> <b>STREET ADDRESS</b> <b>CITY - ST - ZIP</b>	<input type="checkbox"/> Delete		<b>TITLE</b> <b>NAME</b> <b>STREET ADDRESS</b> <b>CITY - ST - ZIP</b>	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
<b>TITLE</b> <b>NAME</b> <b>STREET ADDRESS</b> <b>CITY - ST - ZIP</b>	<input type="checkbox"/> Delete		<b>TITLE</b> <b>NAME</b> <b>STREET ADDRESS</b> <b>CITY - ST - ZIP</b>	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
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<b>12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.</b>					
<b>SIGNATURE:</b> <b>Robert A Levy</b> <b>Director</b> <b>April 26, 2007</b> <b>370-7788</b>					
<small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>					